Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Karen First name  Joy Middle name  Felts Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6495	

Debtor 1	Karen Joy Felts	Case number (if known)	

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years include trade names and doing business as names	☐ I have not used any business name or EINs.  DBA Eden Ray Enterprises LLC  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
Vhere you live	1719 Messner Drive	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Franklin	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing his district to file for pankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Jumbers (EIN) you have used in the last 8 years include trade names and doing business as names.  Where you live  Why you are choosing this district to file for	In plusiness names and imployer identification lumbers (EIN) you have seed in the last 8 years include trade names and foing business as names    I have not used any business name or EINs.

7.	The chapter of the Bankruptcy Code you are			rief description of each, see <i>I</i> go to the top of page 1 and cl			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	☐ Chap	oter 7					
		☐ Chap	oter 11					
		☐ Chap	oter 12					
		■ Chap	oter 13					
8.	How you will pay the fee	ab or	out how yo	entire fee when I file my pe u may pay. Typically, if you ar attorney is submitting your pa address.	e paying	the fee yourself, y	you may pay with cash	i, cashier's check, or money
		■ In	eed to pay	the fee in installments. If yo	u choose	e this option, sign	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official Forn t my fee be waived (You may	,	this option only if	you are filing for Char	oter 7. Ry law, a judge may
		bu ap	it is not requiplies to you	uired to, waive your fee, and rur family size and you are una	nay do so ble to pay	o only if your incor the fee in install	me is less than 150% oments). If you choose t	of the official poverty line that this option, you must fill out
€.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.						
				Southern District of		0/05/40		40 50400
			District	Ohio Eastern Division	When	9/25/19	Case number	19-56188
			District		When		Case number	
			District		When		Case number	
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
	residence:	☐ Yes.	Has yo	ur landlord obtained an eviction	n judgm	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	About ar	n Eviction Judgme	ent Against You (Form	101A) and file it as part of

Case number (if known)

Debtor 1 Karen Joy Felts

Deb	otor 1 Karen Joy Felts			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code
	it to this petition.		Check the appropriate bo	ox to describe your business:
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
				er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	- ' ' '
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o	under Subchapter V so that in choosing to proceed under Substatement, and federal income	court must know whether you are a small business debtor or a debtor choosing to t can set appropriate deadlines. If you indicate that you are a small business debtor or ubchapter V, you must attach your most recent balance sheet, statement of operations, me tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.
		☐ Yes.		11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	· Have Any	/ Hazardous Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to		What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

# Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

# ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

# ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

# About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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I am not required to receive a briefing about credit
counseling because of:

# ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Karen Joy Felts			Case numb	OET (if known)
Par	t 6: Answer These Quest	ions for Re	porting Purposes		
16.	What kind of debts do you have?			consumer debts? Consumer debts are de rsonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
				business debts? Business debts are debts vestment or through the operation of the bu	
			■ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt			Do you estimate that after any exempt pro	perty is excluded and administrative expenses s?
	property is excluded and administrative expenses		□ No		
	are paid that funds will be available for		☐ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		<b>□</b> 5001-10,000	<b>5</b> 0,001-100,000
	<b></b>	☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000
19.	How much do you estimate your assets to	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be worth?		1 - \$100,000 01 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	\$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000 01 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have exa	mined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I of	
				I not pay or agree to pay someone who is not he notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request r	elief in accordance with the	chapter of title 11, United States Code, sp	ecified in this petition.
		bankruptc and 3571.	y case can result in fines up	nt, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Karen Jo	n Joy Felts  oy Felts  of Debtor 1	Signature of Debt	or 2
		Executed	on September 13, 202	£1 Executed on	
			MM / DD / YYYY		M / DD / YYYY

Debtor 1 Karen Joy Felts		Cas	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Statifor which the person is eligible. I also certify that I have	es Code, and have	explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.		
	/s/ Brandon C. Hendrix	Date	September 13, 2021
	Signature of Attorney for Debtor	<del></del>	MM / DD / YYYY
	Brandon C. Hendrix		
	Printed name		
	Sheppard Law Offices, Co., LPA Firm name		
	3535 Fishinger Boulevard		
	Suite 190		
	Hilliard, OH 43026		
	Number, Street, City, State & ZIP Code		

Email address

Contact phone <u>614-523</u>-3106

**0099111 OH**Bar number & State

brandon@sheppardlawoffices.com

Fill i	n this inform	ation to identify your	case:			
Debt	tor 1	Karen Joy Felts				
Debt	tor 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case	e number					
(if kno	wn)				_	k if this is an ded filing
					amen	ded IIIIIg
∩ff	icial For	m 106Sum				
			and Liabilities ar	nd Certain Statistical Information		12/15
Be as	s complete ar	nd accurate as possib	le. If two married people	e are filing together, both are equally responsible	for supplyin	ng correct
				he information on this form. If you are filing amen k the box at the top of this page.	ded schedu	iles after you file
Part	1: Summa	rize Your Assets				
					Your a	ssets
						of what you own
1.	Schedule A/	B: Property (Official Fo	orm 106A/B)		\$	108,200.00
						·
			,		\$	44,960.06
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	153,160.06
Part	2: Summa	rize Your Liabilities				
						abilities It you owe
2.			laims Secured by Property mn A, <i>Amount of claim,</i> at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	119,521.24
3.			Unsecured Claims (Officia 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	2,972.62
	3b. Copy the	total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	72,874.89
				Your total liabilities	\$ <del></del>	195,368.75
Part	3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo	•			
т.				e I	\$	3,403.61
5.		Your Expenses (Official onthly expenses from li			\$	1,329.00
Part	4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	Check this box and submit this form to the court with y	our other sc	hedules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily fo	r a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,186.98

\$

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,972.62
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	52,306.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	55,278.62

	ormation to identify your ca					
Debtor 1	Karen Joy Felts First Name	Middle Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			
, , ,						
United States i	Bankruptcy Court for the: S	SOUTHERN DIST	RICT OF OHIO			
Case number						☐ Check if this is ar amended filing
Schedu each category nink it fits best.	Be as complete and accurate	tems. List an asset as possible. If two	t only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages	equally resp	onsible for sup	pplying correct
nswer every qu	estion.	•	I Estate You Own or Have an Interest In	, •		, ,
1719 Me	essner Drive ss, if available, or other description		t is the property? Check all that apply Single-family home			ims or exemptions. Put d claims on Schedule D:
1719 Me		What	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	t of any secured	
1719 Me Street addres	ss, if available, or other description  OH 43026	6-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land	Current va	t of any secured Who Have Claim Ilue of the perty?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
1719 Me	ss, if available, or other description  OH 43026	6-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current va entire proj \$10 Describe t (such as fo	t of any secured who Have Claim allue of the perty?  08,200.00  he nature of your see simple, tenate), if known.	Current value of the portion you own? \$108,200.00  Secured by Property.
Hilliard City	SS, if available, or other description  OH 43026  State ZIP	6-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire proj \$10 Describe t (such as for a life estate	t of any secured who Have Claim allue of the perty?  08,200.00  he nature of your see simple, tenate), if known.	claims on Schedule D: as Secured by Property.  Current value of the portion you own? \$108,200.00
Hilliard City	SS, if available, or other description  OH 43026  State ZIP	6-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop \$10  Describe t (such as for a life estate)  Check (see inc.)	t of any secured who Have Claim alue of the perty?  08,200.00  he nature of your see simple, tensele), if known.  ple  c if this is commistructions)	current value of the portion you own? \$108,200.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Approximate mileage: 985000 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  3.2 Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016  Debtor 1 only  Check if this is community property Secured claims or of the amount of any secured claims or of the amount of any secured claims Secur	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
No	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
■ Yes  3.1 Make: International	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
Make:   International   Model:   Prostar   Debtor 1 only   Creditors Who Have Claims Secured claims or the amount of any secured claims or the entire property? Current value of the entire property? Current value of the entire property? In the entire proper	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
Model: Prostar Year: 2009 Approximate mileage: 985000 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA  Who has an interest in the property? Check one the amount of any secured claims or the amount of any secured claims	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
Model: Prostar Year: 2009 Approximate mileage: 985000 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA  Who has an interest in the property? Check one the amount of any secured claims or the amount of any	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$6,500.0  inns or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0
Year:   2009	Current value of the portion you own?  \$6,500.0  ims or exemptions. Put d claims on Schedule Das Secured by Property.  Current value of the portion you own?  \$17,000.0
Approximate mileage: 985000 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  3.2 Make: Cadillac Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Other information:  Check if this is community property  Current value of the entire property? Check one The amount of any secured claims or the debtors and another  Current value of the entire property?  Check if this is community property  (see instructions)  3.3 Make: KIA  Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Do not deduct secured claims or the amount of any	\$6,500.0  \$6,500.0  inns or exemptions. Put d claims on Schedule D as Secured by Property.  Current value of the portion you own?  \$17,000.0  inns or exemptions. Put d claims on Schedule D as Secured by Property.  Current value of the
Other information:    Cocation: 1719 Messner Drive, Hilliard OH 43026	\$6,500.0  inms or exemptions. Put d claims on Schedule D ins Secured by Property.  Current value of the portion you own?  \$17,000.0  inms or exemptions. Put d claims on Schedule D ins Secured by Property.  Current value of the
Location: 1719 Messner Drive, Hilliard OH 43026    Check if this is community property (see instructions)	ims or exemptions. Put d claims on Schedule D ins Secured by Property.  Current value of the portion you own?  \$17,000.0
SRX	ims or exemptions. Put d claims on Schedule D ins Secured by Property.  Current value of the portion you own?  \$17,000.0
3.2 Make: Cadillac  Model: SRX  Year: 2016  Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA  Model: Forte  Year: 2016  Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Make: KIA  Model: Forte  Year: 2016  Approximate mileage: 14400 Other information:  Check if this is community property  Debtor 1 only  Check one  Start Debtor 2 only  Check one  Do not deduct secured claims or one the debtors and another  Check if this is community property  Start Debtor 1 only  Do not deduct secured claims or one the amount of any secured claims or one	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0  Dims or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the
Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Current value of the entire property?  \$17,000.00  Do not deduct secured claims or entire property?  Current value of the entire property?	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0  Dims or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the
Model: SRX Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Current value of the entire property?  \$17,000.00  Do not deduct secured claims or entire amount of any secured claims or entire amount of any secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured claims.  Creditors Who Have Claims Secured claims.  Creditors Who Have Claims Secured claims or entire amount of any secured claims.  Creditors Who Have Claims Secured.  Current value of the entire property?	d claims on Schedule Dons Secured by Property.  Current value of the portion you own?  \$17,000.0  Dims or exemptions. Put d claims on Schedule Dons Secured by Property.  Current value of the
Year: 2016 Approximate mileage: 75400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Approximate mileage: 75400 Other information:  Check if this is community property (see instructions)  Check one Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Approximate mileage: 14400 Other information:  Check if this is community property (see instructions)  Check one Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Current value of the curre the amount of any secured claims or on the amount of any secured claims or o	Current value of the portion you own? \$17,000.0  sims or exemptions. Put d claims on Schedule D as Secured by Property. Current value of the
Approximate mileage: 75400 Other information:    Location: 1719 Messner Drive, Hilliard OH 43026	\$17,000.0
Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Check if this is community property (see instructions)  Who has an interest in the property? Check one Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  At least one of the debtors and another  At least one of the debtors and another  Standard At least one of the debtors and another  Current value of the curre entire property? Check one At least one of the debtors and another  Current value of the entire property? Check one At least one of the debtors and another  Current value of the entire property? Portion of the debtors and another  Current value of the entire property? Standard At least one of the debtors and another  Check if this is community property  \$13,600.00	\$17,000.0  hims or exemptions. Put d claims on Schedule D has Secured by Property.  Current value of the
Location: 1719 Messner Drive, Hilliard OH 43026  Check if this is community property (see instructions)  Check if this is community property (see instructions)  To not deduct secured claims or the amount of any	nims or exemptions. Put d claims on <i>Schedule D</i> ns <i>Secured by Property</i> .  Current value of the
Hilliard OH 43026    Check if this is community property (see instructions)   \$17,000.00	nims or exemptions. Put d claims on <i>Schedule D</i> ns <i>Secured by Property</i> .  Current value of the
3.3 Make: KIA  Model: Forte  Year: 2016  Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Who has an interest in the property? Check one  Do not deduct secured claims or the amount of any secured cl	d claims on Schedule Dans Secured by Property.  Current value of the
Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Model: Forte Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Current value of the entire property? Current value of the entire property? portion  Current value of the entire property? portion  Current value of the entire property? State of the debtors and another  Current value of the entire property? State of the entire property? State of the entire property? State of the amount of any secured claims of the amount of any secured claims of the amount of any secured claims of the entire property? State of the amount of any secured claims of the entire property of the amount of any secured claims of the amount of the a	d claims on Schedule Dans Secured by Property.  Current value of the
Model: Forte Year: 2016 Approximate mileage: 14400 Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  Model: Forte Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Current value of the entire property? Current value of the entire property? portion  Current value of the entire property? by the amount of any secured claims Sec	d claims on Schedule Dans Secured by Property.  Current value of the
Year: 2016	Current value of the
Approximate mileage: 14400 Other information:	
Other information:  Location: 1719 Messner Drive, Hilliard OH 43026  At least one of the debtors and another  \$\sum_{\text{Check if this is community property}}\$ \$13,600.00	
Location: 1719 Messner Drive, Hilliard OH 43026  Check if this is community property  \$13,600.00	portion you own?
Hilliard OH 43026	
(see instructions)	\$13,600.0
Do not deduct occurred desires are	ima ar avamatiana Dut
3.4 Make: Dodge Who has an interest in the property? Check one Do not deduct secured claims or each the amount of any secured claims	d claims on <i>Schedule D</i>
Model: Ram Debtor 1 only Creditors Who Have Claims Secu	ns Secured by Property.
	Current value of the
	portion you own?
Other information:	
Hilliard OH 43026 - not operable	\$5,146.0
- needs battary and brakes (see instructions)	
4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories	
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No	
■ No	
■ No □ Yes	
□ Yes	
☐ Yes	\$42,246.00
Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for	\$42,246.00
Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	\$42,246.00
Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	\$42,246.00  Current value of the ortion you own?

claims or exemptions.

D	ebtor 1	Karen Joy F	elts	Case number (if know	/n)
6.		old goods and t les: Major appliar	urnishings ces, furniture, linens, china, kitchenware		
	Yes.	Describe			
			household goods and furnishings		\$2,000.00
7.	Electron Example	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, prir phones, cameras, media players, games	nters, scanners; musi	c collections; electronic devices
	☐ Yes.	Describe			
В.	Example		figurines; paintings, prints, or other artwork; books, pictures, or other ons, memorabilia, collectibles	art objects; stamp, co	oin, or baseball card collections;
	■ No □ Yes.	Describe			
_	Equipme	ent for sports a	ad habbina		
э.			graphic, exercise, and other hobby equipment; bicycles, pool tables, ç	golf clubs, skis; cano	es and kayaks; carpentry tools;
		Describe			
10	■ No		s, shotguns, ammunition, and related equipment		
11	□ No ·		othes, furs, leather coats, designer wear, shoes, accessories		
			clothing		\$300.00
12	☐ No		welry, costume jewelry, engagement rings, wedding rings, heirloom je	welry, watches, gem	s, gold, silver
			jewelry		\$150.00
13	Examp ☐ No	rm animals bles: Dogs, cats, Describe	birds, horses		
			3 Dogs and 1 cat - Non-Breeding		\$0.00
14	■ No		d household items you did not already list, including any health a	aids you did not list	
	⊔ Yes.	Give specific inf	ormation		
15			of all of your entries from Part 3, including any entries for pages number here	you have attached	\$2,450.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Karen Joy Felts		Case number (if known)	
Part 4:	Describe Your Financial Assets			
	own or have any legal or equitable interest in an	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you have in your wallet, in your home	•	nand when you file your petition	on
			Cash	\$22.00
	psits of money mples: Checking, savings, or other financial accoun institutions. If you have multiple accounts wi			ouses, and other similar
	S	Institution name:		
	17.1. Joint Checking	Huntington National Ba Account # xxxxx3293 -		\$103.26
Exam ■ No □ Yes 19. <b>Non-</b> p joint	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with broke Institution or issuer nar publicly traded stock and interests in incorpora	me:		t in an LLC, partnership, and
□ No ■ Yes	s. Give specific information about them			
_ 100	Name of entity:	•	% of ownership:	
	truck Trucking busine deliver for 3rd party - Business Bank Accou	btor - No Fixtures - No		\$138.80
Nego Non- ■ No	ernment and corporate bonds and other negotia otiable instruments include personal checks, cashie negotiable instruments are those you cannot transfer.  S. Give specific information about them Issuer name:	ers' checks, promissory notes, ar	nd money orders.	
Exar ■ No	ement or pension accounts  mples: Interests in IRA, ERISA, Keogh, 401(k), 403  s. List each account separately.	(b), thrift savings accounts, or ot	her pension or profit-sharing	plans
□ res	Type of account:	Institution name:		
Your <i>Exar</i> ■ No		blic utilities (electric, gas, water),	telecommunications compan	ies, or others
☐ Yes	S	Institution name or individua	ıl:	
■ No	<b>lities</b> (A contract for a periodic payment of money to such that the su	to you, either for life or for a num	ber of years)	

De	ebtor 1	Karen Joy	y Felts		Case number (if	known)
24.	26 U.S.0		cation IRA, in an accour (1), 529A(b), and 529(b)(		ram, or under a qualified state tuit	ion program.
	■ No □ Yes		Institution name and de	escription. Separately file the	records of any interests.11 U.S.C. §	521(c):
25.	Trusts,	, equitable or	r future interests in pro	perty (other than anything	listed in line 1), and rights or pow	ers exercisable for your benefit
	☐ Yes.	Give specific	c information about them.			
26.			•	crets, and other intellectual s, proceeds from royalties and		
	☐ Yes.	Give specific	c information about them			
27.			es, and other general in permits, exclusive licens		noldings, liquor licenses, professiona	ıl licenses
	☐ Yes.	Give specific	c information about them.			
M	oney or p	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed t	to you			
	_	Give specific	information about them,	including whether you alread	ly filed the returns and the tax years.	
29.			e or lump sum alimony, s	pousal support, child support	, maintenance, divorce settlement, p	property settlement
	■ No □ Yes. 0	Give specific	information			
30.	Examp	oles: Unpaid v	neone owes you wages, disability insurand ; unpaid loans you made		ts, sick pay, vacation pay, workers'	compensation, Social Security
	■ No □ Yes	Give specific	c information			
31.	. Interest	ts in insuran	nce policies	e; health savings account (HS	SA); credit, homeowner's, or renter's	insurance
	■ No	Nama tha inc	surance company of each	a policy and list its value		
	<b>ш</b> тез. і	ivame me ms	Company name		Beneficiary:	Surrender or refund value:
32.	If you a			om someone who has died pect proceeds from a life insu	rance policy, or are currently entitled	d to receive property because
	■ No □ Yes.	Give specific	c information			
33.				ot you have filed a lawsuit of insurance claims, or rights to	or made a demand for payment	
	■ No □ Yes.	Describe ead	ch claim			
34.	Other c	contingent a	nd unliquidated claims	of every nature, including	counterclaims of the debtor and ri	ights to set off claims
	■ No	_	-	<b>.</b>		-
	LI Yes	Describe each	ch claim			

Debto	or 1	Karen Joy Felts		Case number (if known)	
35. <b>A</b> ı	ny fin	ancial assets you did not already list			
	No				
	Yes.	Give specific information			
		ne dollar value of all of your entries from Part 4, including rt 4. Write that number here		ges you have attached	\$264.06
Part 5	Des	cribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. <b>Do</b>	you o	wn or have any legal or equitable interest in any business-relate	d property?		
	No. Go	to Part 6.			
	es. G	o to line 38.			
Part 6		cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>D</b> o	o vou	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
_	_ `	Go to Part 7.		J	
Г	7 Yes	Go to line 47.			
_	<b>_</b> 103.	Go to line 47.			
Part 7		Describe All Property You Own or Have an Interest in That You	Did Not List Abovo		
I ait I	•	Describe Ail Troperty Tou Own of Have all Interest in That Tou	Did Not List Above		
		have other property of any kind you did not already list?	•		
		les: Season tickets, country club membership			
	No				
Ц	Yes. (	Give specific information			
54. <i>I</i>	Add ti	ne dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8		List the Totals of Each Part of this Form		ı	
					****
		: Total real estate, line 2			\$108,200.00
		: Total vehicles, line 5	\$42,246.00		
		: Total personal and household items, line 15	\$2,450.00		
		: Total financial assets, line 36	\$264.06		
		: Total business-related property, line 45	\$0.00		
		: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>I</b>	Part 1	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$44,960.06	Copy personal property to	stal <b>\$44,960.06</b>
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$153,160.06
				l	

Fill in this inform	nation to identify your	case:		
Debtor 1	Karen Joy Felts			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an
<u> </u>				amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing w.</li> </ol>
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- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
1719 Messner Drive Hilliard, OH 43026 Franklin County Line from Schedule A/B: 1.1	\$108,200.00	■	\$145,425.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line IIOIII Scriedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
2009 International Prostar 985000 miles	\$6,500.00		\$2,550.00	Ohio Rev. Code Ann. § 2329.66(A)(5)
Location: 1719 Messner Drive, Hilliard OH 43026 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(0)
2016 Cadillac SRX 75400 miles Location: 1719 Messner Drive,	\$17,000.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Hilliard OH 43026 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(2)
2016 Cadillac SRX 75400 miles Location: 1719 Messner Drive,	\$17,000.00		\$1,186.20	Ohio Rev. Code Ann. § 2329.66(A)(18)
Hilliard OH 43026 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
household goods and furnishings	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Generalie A/D. V. I			100% of fair market value, up to any applicable statutory limit	2020.00(7)(4)(4)

Naren Joy Feits			Case number (if known)	
escription of the property and line on ule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
ng om Schedule A/R: 11 1	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
on Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(1)(4)(4)
ry om Schedule A/R: 12.1	\$150.00		\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
on concare A.D. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(/ 1)(4)(8)
om Schedule A/R: <b>16.1</b>	\$22.00		\$22.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
on concade A.D. 10.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
Checking: Huntington National	\$103.26		\$103.26	Ohio Rev. Code Ann. § 2329.66(A)(3)
unt # xxxxx3293 - With Daughter om Schedule A/B: 17.1	•		100% of fair market value, up to any applicable statutory limit	2020:00(03)(07)
Ray Enterprises LLC -Singl	\$138.80		\$138.80	Ohio Rev. Code Ann. § 2329.66(A)(18)
ess - Client takes orders to er for 3rd party - ess Bank Account, Value of 80 - Truck is owned by Debtor - ktures - No equipment - No furniture - No A/R -			100% of fair market value, up to any applicable statutory limit	2020100(13)(10)
om <i>Schedule A/B</i> : <b>19.1</b>				
			iled on or after the date of adjustmer	nt.)
_	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
] Yes				
	ng om Schedule A/B: 11.1  Ty om Schedule A/B: 12.1  The schedule A/B: 12.1  The schedule A/B: 16.1  The schedule A/B: 16.1  The schedule A/B: 17.1  The schedule A/B: 17.1	Scription of the property and line on the A/B that lists this property  Ing Sand Schedule A/B: 11.1  Sy Sand Schedule A/B: 12.1  Standard Schedule A/B: 13.8.80  Standard Schedule A/B: 13.8.80  Standard Schedule A/B: 13.8.80  Standard Schedule A/B: 13.1  Standard Schedule Sc	Scription of the property and line on the A/B that lists this property  Ing Schedule A/B: 11.1  Sy Sy Sy Standard Schedule A/B: 12.1  Sy Sy Sy Sy Standard Schedule A/B: 12.1  Checking: Huntington National Sy	Current value of the portion of the property and line on let A/B that lists this property  Copy the value from Schedule A/B: 11.1  Sand Schedule A/B: 11.1  Standard Schedule A/B: 11.1  Standard Schedule A/B: 11.1  Standard Schedule A/B: 12.1  Stand

	in this inform	nation to identify you	r case:			
Deb	otor 1	Karen Joy Felts				
		First Name	Middle Name Last Name			
	otor 2 use if, filing)	First Name	Middle Name Last Name		-	
Uni	led States Dan	nkruptcy Court for the:	300 THERN DISTRICT OF ONIO		-	
	e number					
(if kn	own)					if this is an
					amend	ded filing
Off	icial Form	106D				
			Who Have Claims Secure	d by Propert	V	12/15
<u> </u>	iledule i	D. Creditors	Wild Have Claims Secure	d by Fropert	<u>y                                    </u>	12/13
			f two married people are filing together, both are e out, number the entries, and attach it to this form. (			
	per (if known).	Additional Lage, Illi It c	out, number the entires, and attach it to this form.	on the top of any addition	nai pages, write your na	ine and case
1. Do	any creditors l	have claims secured by	your property?			
	☐ No. Check	this box and submit th	nis form to the court with your other schedules. '	You have nothing else t	to report on this form.	
	Yes, Fill in	all of the information b	pelow.	Ü	·	
Par		all of the information b	pelow.	J	·	
	t 1: List All	I Secured Claims		Column A	Column B	Column C
<b>2.</b> L	List All	I Secured Claims  claims. If a creditor has note than one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As	Column A ly Amount of claim	Value of collateral	Unsecured
<b>2.</b> L	List All	I Secured Claims  claims. If a creditor has note than one creditor has	nore than one secured claim, list the creditor separate	ly  Column A  Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
<b>2.</b> L	List All	I Secured Claims claims. If a creditor has nore than one creditor has st the claims in alphabetic	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As	Column A ly Amount of claim	Value of collateral	Unsecured
2. L for e	t 1: List All	I Secured Claims claims. If a creditor has nore than one creditor has st the claims in alphabetic	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e	List All secured contact claim. If month as possible, list Bridgecres	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic  st	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive,	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e	ist all secured contact claim. If month as possible, list Bridgecres	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic  st	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive, Hilliard OH 43026	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e	ist all secured contact claim. If month as possible, list Creditor's Name  7300 East Avenue Suite 100	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic  st  Hampton	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive,	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e	ist all secured contact claim. If month as possible, list Bridgecres Creditor's Name  7300 East Avenue	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic  st  Hampton	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive, Hilliard OH 43026  As of the date you file, the claim is: Check all that	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e	ist all secured cach claim. If mo has possible, list Creditor's Name  7300 East Avenue Suite 100 Mesa, AZ 8	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic  st  Hampton	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles  Location: 1719 Messner Drive,  Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e muc	ist all secured of each claim. If moth as possible, list Bridgecres Creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street,	I Secured Claims  claims. If a creditor has nore than one creditor has state claims in alphabetic  st  Hampton  85209  City, State & Zip Code	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles  Location: 1719 Messner Drive,  Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	ly  Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. L for e muc	ist all secured cach claim. If mo has possible, list Creditor's Name  7300 East Avenue Suite 100 Mesa, AZ 8	I Secured Claims  claims. If a creditor has nore than one creditor has state claims in alphabetic  st  Hampton  85209  City, State & Zip Code	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles  Location: 1719 Messner Drive,  Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any
2. L for e muc	ist all secured of each claim. If moth as possible, list Bridgecres Creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street,	I Secured Claims  claims. If a creditor has nore than one creditor has state claims in alphabetic  st  Hampton  85209  City, State & Zip Code	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive, Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or see	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any
2. L for e mud	ist all secured clack claim. If moth as possible, list all secured clack claim. If moth as possible, list creditor's Name Creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street, colones the delication of the colones and the claim of the c	I Secured Claims  claims. If a creditor has nore than one creditor has state claims in alphabetic  st  Hampton  85209  City, State & Zip Code	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles  Location: 1719 Messner Drive,  Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any
2. L for € mud	ist all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list are creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street, or owes the del Debtor 1 only	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic st  Hampton  85209  City, State & Zip Code  bt? Check one.	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive, Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or see	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any
2. L for € mudo 2.1	ist all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list are creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street, or owes the del Debtor 1 only Debtor 2 only Debtor 1 and Del	I Secured Claims  claims. If a creditor has nore than one creditor has st the claims in alphabetic st  Hampton  85209  City, State & Zip Code  bt? Check one.	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles  Location: 1719 Messner Drive,  Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or second or continue).	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any
2. L for € muco	ist all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list all secured of ach claim. If moth as possible, list are creditor's Name 7300 East Avenue Suite 100 Mesa, AZ & Number, Street, or owes the del Debtor 1 only Debtor 2 only Debtor 1 and Del	I Secured Claims  claims. If a creditor has nore than one creditor has state claims in alphabetic state claims in alphabetic state.  Hampton  85209  City, State & Zip Code  bt? Check one.	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2016 KIA Forte 14400 miles Location: 1719 Messner Drive, Hilliard OH 43026  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$14,610.00	Value of collateral that supports this claim	Unsecured portion If any

Debtor 1 Karen Joy Felts		Case number (if known)			
First Name Middle Na	me Last Name				
2.2 Hilliard Commons Condo Assoc.  Creditor's Name	Describe the property that secures the claim:	\$13,879.24	\$108,200.00	\$0.00	
Creditor's Name	1719 Messner Drive Hilliard, OH 43026 Franklin County				
1667 Bennigan Drive Hilliard, OH 43026	As of the date you file, the claim is: Check all that apply.  □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or sec car loan)	cured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number 3771				
2.3 Lendmark Financial Service	Describe the property that secures the claim:	\$6,551.00	\$5,146.00	\$1,405.00	
23	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that apply.	\$6,551.00	\$5,146.00	\$1,405.00	
Service Creditor's Name  1735 North Brown Road Suite 300	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that	\$6,551.00	\$5,146.00	\$1,405.00	
2.3 Service Creditor's Name  1735 North Brown Road Suite 300 Lawenceville, GA 60043	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.		\$5,146.00	\$1,405.00	
2.3 Service Creditor's Name  1735 North Brown Road Suite 300 Lawenceville, GA 60043  Number, Street, City, State & Zip Code	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed		\$5,146.00	\$1,405.00	
2.3 Service Creditor's Name  1735 North Brown Road Suite 300 Lawenceville, GA 60043  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan)  Statutory lien (such as tax lien, mechanic's lien)		\$5,146.00	\$1,405.00	
2.3 Service Creditor's Name  1735 North Brown Road Suite 300 Lawenceville, GA 60043  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	2004 Dodge Ram 182600 miles Location: 1719 Messner Drive, Hilliard OH 43026 - not operable - needs battary and brakes As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit		\$5,146.00	\$1,405.00	

6902

Last 4 digits of account number

Date debt was incurred 01/23/2018

Debtor 1 Karen Joy Felts		Case number (if known)		
First Name Middle N	lame Last Name			
2.4 <b>Wfhm</b>	Describe the property that secures the claim:	\$84,481.00	\$108,200.00	\$0.00
Creditor's Name	1719 Messner Drive Hilliard, OH 43026 Franklin County			
Attn: Bankruptcy Po Box 10335 Des Moines, IA 50306	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgag	je		
Opened 12/16 Last Active Date debt was incurred 8/07/19	Last 4 digits of account number 542	.4		
		0440 504		
Add the dollar value of your entries in C If this is the last page of your form, add	Column A on this page. Write that number here:	\$119,521.2		
Write that number here:	The dollar value totals from all pages.	\$119,521.	24	
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you o	pe notified about your bankruptcy for a debt that yowe to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors his page.	nd then list the collection agen	cy here. Similarly, if you h	ave more
Name, Number, Street, City, State & Kaman & Cusimano	& Zip Code On	which line in Part 1 did you ente	r the creditor? _2.2_	
8101 North High Street Suite 370, ATTM Magdaler Columbus, OH 43235		t 4 digits of account number		

						-	
Fill	in this infor	mation to identify your c	ase:				
De	btor 1	Karen Joy Felts					
		First Name	Middle Name	Last Name			
1 -	btor 2 buse if, filing)	First Name	Middle Name	Last Name			
` '	, 0,						
Un	ited States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	ſ OF OHIO			
Ca	se number						
	nown)					☐ Check	k if this is an
						amen	ided filing
∩f	ficial Forr	m 106E/F					
_		F: Creditors W	no Have Unsec	urad Claime			12/15
				PRIORITY claims and Part 2	for creditors with NON	IPRIORITY claims I	
Sch Sch left.	edule G: Exect edule D: Credit Attach the Cot le and case nu	utory Contracts and Unexpir tors Who Have Claims Secu ntinuation Page to this page mber (if known).	red Leases (Official Form red by Property. If more s b. If you have no informati	<ul> <li>Also list executory contra 106G). Do not include any c pace is needed, copy the Pa on to report in a Part, do not</li> </ul>	reditors with partially s art you need, fill it out,	secured claims that number the entries	are listed in in the boxes on the
		II of Your PRIORITY Uns					
1.	_ ′	ors have priority unsecured	claims against you?				
	No. Go to F	Part 2.					
_	Yes.		W 15 1				
2.	identify what ty possible, list th	pe of claim it is. If a claim has	both priority and nonpriorit according to the creditor's	one priority unsecured claim, y amounts, list that claim here name. If you have more than t reditors in Part 3.	and show both priority	and nonpriority amou	nts. As much as
	(For an explan	ation of each type of claim, se	ee the instructions for this for	rm in the instruction booklet.)	Total claim	Priority	Nonpriority
	٦					amount	amount
2.1		epartment of Taxation	Last 4 digits of	of account number 2018	\$2,972.62	\$2,972.62	2 \$0.00
		reditor's Name <b>k 182402</b>	When was the	e debt incurred?			
	Columi	bus, OH 43218-2402				=	
		Street City State Zip Code	As of the date	you file, the claim is: Check	all that apply		
	Who incurre	ed the debt? Check one.	☐ Contingent				
	Debtor 1	only	☐ Unliquidate	:d			
	Debtor 2	only	☐ Disputed				
	Debtor 1	and Debtor 2 only	Type of PRIO	RITY unsecured claim:			
	☐ At least o	ne of the debtors and another	☐ Domestic s	support obligations			
	☐ Check if	this claim is for a communi	ty debt Taxes and	certain other debts you owe th	ne government		
	Is the claim	subject to offset?		death or personal injury while	-		
	■ No		Other. Spe	cifv			
	☐ Yes			income taxes			_
_							
Pa	rt 2: List A	All of Your NONPRIORITY	Unsecured Claims				
		ors have nonpriority unsecu					
•				ourt with your other schedules			
	Yes.	ive nothing to report in this pa	it. Submit this form to the c	out with your other schedules	•		
4.	unsecured clai	im, list the creditor separately	for each claim. For each cla	der of the creditor who hold aim listed, identify what type of 3.If you have more than three	claim it is. Do not list cl	aims already included	d in Part 1. If more

Total claim

Debto	r 1 Karen Joy Felts	Case number (if known)	
4.1	Chase Bank Nonpriority Creditor's Name	Last 4 digits of account number 8677	\$747.15
	340 S. Cleveland Avenue, Bldg. 370 Westerville, OH 43081	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card last used over 1 year ago	
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 9903	\$5,252.00
	Attn: Bankruptcy Po Box 15298	When was the debt incurred?	
	Wilmington, DE 19850  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Gleck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card last used over 1 year ago	
4.3	Chase Card Services	Last 4 digits of account number 8962	\$3,420.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	
	Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card last used over 1 year ago	

Debto	r 1 Karen Joy Felts		Case number (if known)	
4.4	Credit Care Collections	Last 4 digits of account number	0655	\$95.00
	Nonpriority Creditor's Name Attn: Bankruptcy 112 Dowell Ave Bellefontaine, OH 43311	When was the debt incurred?	Opened 07/18 Last Active 02/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical De	ebt	
.5	Credit Control Service Nonpriority Creditor's Name	Last 4 digits of account number	7002	\$80.00
	Po Box 607 Norwood, MA 02062	When was the debt incurred?	Opened 05/21 Last Active 01/21	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 00 aa.0 <b>,</b> 0a0,0 o.a	ion on an unat apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Collection In. Co	Attorney Allstate Vehicle Prop	
.6	Dayton VA Medical Center	Last 4 digits of account number	9L8J	\$544.51
	Nonpriority Creditor's Name 4100 W. 3rd Street Dayton, OH 45428	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	·	51, 2012 2012 2010	
	□ res	Other. Specify medical		

Debtor	1 Karen Joy Felts		Case number (if known)	
4.7	Jefferson Capital Systems, LLC	Last 4 digits of account number	1003	\$1,105.00
	Nonpriority Creditor's Name Attn: Bankruptcy 16 Mcleland Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 10/19 Last Active 03/19	-
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Morris Fun	Company Account Syncrhony iture	-
4.8	Kohls/Capital One	Last 4 digits of account number	2088	\$875.00
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?		-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify credit card	last used over 1 year ago	-
4.9	Macys/fdsb	Last 4 digits of account number	1341	\$336.00
	Nonpriority Creditor's Name Attn: Bankruptcy 7 West Seventh Street Cincinnati, OH 45202	When was the debt incurred?		-
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	•	
	Yes	■ Other. Specify credit card	last used over 1 year ago	

1 Karen Joy Felts	Case number (if known)	
Mark R. Blackwell	Last 4 digits of account number 6616	\$2,516.23
Nonpriority Creditor's Name 704 Cordelia Drive Galloway, OH 43119	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Court ordered debt	
Navient	Last 4 digits of account number 9773	\$43,180.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640	When was the debt incurred?	
Wiles-Barr, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	■ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	Student loan(s)	
Nelnet	Last 4 digits of account number 6699	\$4,666.00
Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?	
Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	☐ Other. Specify	
	Student loan(s)	

Debto	Karen Joy Feits	Case number (if known)				
4.1	Nelnet	Last 4 digits of account number 6599	\$4,460.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?				
	Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	_	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	■ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
		Student loan(s)				
4.1	Wells Fargo Bank NA	Last 4 digits of account number 5828	\$5,598.00			
	Nonpriority Creditor's Name 1 Home Campus Mac X2303-01a 3rd Floor Des Moines, IA 50328	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify credit card last used over 1 year ago				
is try have notifi	his page only if you have others to be notified ing to collect from you for a debt you owe to s	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if someone else, list the original creditor in Parts 1 or 2, then list the collection agency her lat you listed in Parts 1 or 2, list the additional creditors here. If you do not have addition	e. Similarly, if you			
	ey E. Sherman, Esq.	Line 4.7 of (Check one):				
РО В	rson Capital Systems LLC ox 17210 en, CO 80402	■ Part 2: Creditors with Nonpriority Unsecured Claim	ns			
	,	Last 4 digits of account number				
Javite	and Address ch Block	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one):   Part 1: Creditors with Priority Unsecured Claims				
	Superior Ave, 19th Floor	■ Part 2: Creditors with Nonpriority Unsecured Clain	ns			
Cieve	eland, OH 44114-2521	Last 4 digits of account number				
Radiu	and Address us Global Solutions LLC ox 390905	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claim				
Mail (	Code CSB2 eapolis, MN 55439		lio eli			
		Last 4 digits of account number				

Debtor 1 Karen Joy Felts		Case number (if known)		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Robert D. Essex, Esq.	Line <b>4.10</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured C	laims	

Robert D. Essex, Esq. 604 East Rich Street, Suite 100 Columbus, OH 43215

☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4:	Add the Amounts for Each Type of Unsecured Cl	aim
---------	---	-----

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,972.62
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,972.62
				Total Claim
Γotal	6f.	Student loans	6f.	\$ 52,306.00
claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,568.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 72,874.89

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Karen Joy Felts						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO				
Case number (if known)						Check if this is an amended filing	

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
	Number	Street			_
	City		State	ZIP Code	_
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	<u> </u>		Olato	2 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	•				
0	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	Jity		Cidio		

Fill in this info	ormation to identify your	case:			
Debtor 1	Karen Joy Felts				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an
					amended filing
Official F	orm 106H				
Schedul	e H: Your Cod	ebtors			12/15
1. Do you □ No ■ Yes	have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	as a codebtor.	
2. Within t	he last 8 years, have you alifornia, Idaho, Louisiana,				rty states and territories include
■ No. Go	to line 2				,
	d your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line 2 a	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guaran	ntor or cosigner. Make s	ure you have listed	ng with you. List the person shown the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor , Number, Street, City, State and ZI	P Code		Column 2: The ci	reditor to whom you owe the debt les that apply:
—·				_	
	othy Felts 0 East Gagarinite Lane	ā		☐ Schedule D,	
	Tan Valley, AZ 85143			■ Schedule E/F □ Schedule G Navient	· ———

Fill	in this information to identify your	case:				1				
Del	otor 1 Karen Joy	Felts								
_	otor 2  buse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF OHIO							
	se number nown)		-				amende uppleme	nt showing	g postpetitior	
$\bigcirc$	fficial Form 106l								ollowing date	:
	chedule I: Your Inc	ome				MM	/ DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not in	clude infor	mati	on about y	our spo	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			D	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employe</li></ul>	d			☐ Emplo ☐ Not er	-		
	employers.	Occupation	truck driver							
	Include part-time, seasonal, or self-employed work.	Employer's name	Eden Ray En	terprises	LLC	;				
	Occupation may include student or homemaker, if it applies.	Employer's address	1719 Messne Hilliard, OH 4							
		How long employed t	here? 5 mc	onths			_			
Pai	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing t	to report for	any	line, write \$	0 in the	space. Inc	clude your no	n-filing
,	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informa	ation for all	empl	oyers for tha	at perso	n on the lir	nes below. If	you need
						For Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	-
4	Calculate gross Income. Add I	ine 2 + line 3		4	2	n	00	\$	N/A	1

Debtor 1	Karen Joy Felts	_	Case number (if known)			
Ca	muling 4 hors	4	For Debtor 1	For Debto	spouse	
Co	py line 4 here	4.	\$0.00	<u> </u>	N/A	
5. <b>Lis</b>	et all payroll deductions:					
5a.	•	5a.	\$0.00	_	N/A	
5b.	•	5b.			N/A	
5c.	•	5c.	\$ 0.00	- :	N/A	
5d.		5d.	\$0.00		N/A	
5e.		5e.	\$ 0.00		N/A	
5f.	5	5f.	\$ 0.00		N/A	
5g.		5g.	\$ 0.00	_	N/A	
5h.		5h.+	+ \$0.00		N/A	
6. <b>Ad</b>	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	<u> </u>	N/A	
7. <b>Ca</b>	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 0.00	\$	N/A	
8. <b>Lis</b> 8a.	st all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 2,703.61	\$	N/A	
8b.	•	8b.	\$ 0.00		N/A	
8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 700.00	. \$	N/A	
8d.	Unemployment compensation	8d.	\$ 0.00	\$	N/A	
8e.	Social Security	8e.	\$ 0.00	\$	N/A	
8f. 8g.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f. 8g.	\$		N/A N/A	
8h	Other monthly income. Specify:	8h.+	+ \$ 0.00	+ \$	N/A	
9. <b>A</b> d	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$3,403.61	\$	N/A	
10. <b>Ca</b>	Iculate monthly income. Add line 7 + line 9.	10. \$	3,403.61 +	N/A	<b>A</b> = \$	3,403.61
Ad	d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				] [	
Inc oth Do	the all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your her friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	depen	.,	sted in <i>Schedu</i>	ıle J. . +\$	0.00
Wr	Id the amount in the last column of line 10 to the amount in line 11. The resite that amount on the Summary of Schedules and Statistical Summary of Certaplies				. \$	3,403.61

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

monthly income

Fill	in this information to identify your case:				
Deb	tor 1 Karen Joy Felts		Check	if this is:	
D-1			_	n amended filing	San arada a CC arada antara
	tor 2			supplement snow 3 expenses as of t	ring postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO		N	IM / DD / YYYY	
Cas	e number				
1	nown)				
$\bigcirc$	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question.				r supplying correct
Par 1.	Is this a joint case?				
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Housel	hold of Debto	r 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		18	■ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
J.	expenses of people other than yourself and your dependents?				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est	imate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a suppl licable date.	ou are using this fo emental Schedule	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report the form and fill in the
the	ude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I:</i> You have a specified to the control of the cont			Your expe	nece
(Of	iicial Form 106l.)			тош ехре	11363
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	4a. \$ 5. \$		0.00

Debto	r 1	Karen Jo	by Felts	Case num	ber (if known)	
S. U	ltilit	ies:				
-	a.		heat, natural gas	6a.	\$	180.00
	b.	•	wer, garbage collection	6b.	\$	0.00
	C.		e, cell phone, Internet, satellite, and cable services	6c.		300.00
	d.	Other. Spe		6d.	· -	0.00
			ekeeping supplies	7.	·	500.00
			children's education costs	8.	\$	0.00
_			ry, and dry cleaning	9.	\$	
		•			·	25.00
		•	products and services	10.	·	25.00
			ntal expenses	11.	\$	25.00
			Include gas, maintenance, bus or train fare. ar payments.	12.	\$	75.00
			ar payments. clubs, recreation, newspapers, magazines, and books	13.	·	
					·	0.00
			ributions and religious donations	14.	\$	0.00
		rance.	courance deducted from your pay or included in lines 4 or 20			
			surance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
		Life insura		15a.	· -	0.00
		Health ins		15b.	·	0.00
		Vehicle ins		15c.	·	199.00
			ırance. Specify:	15d.	\$	0.00
			clude taxes deducted from your pay or included in lines 4 or 20.		•	
	pec	•		16.	\$	0.00
			ease payments:			
1	7a.	Car payme	ents for Vehicle 1	17a.	\$	0.00
1	7b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
1	7c.	Other. Spe	ecify:	17c.	\$	0.00
1	7d.	Other. Spe	ecify:	17d.	\$	0.00
			of alimony, maintenance, and support that you did not report a	ıs		
			your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
			s you make to support others who do not live with you.		\$	0.00
S	рес	ify:		19.		
). <b>C</b>	the	r real prop	erty expenses not included in lines 4 or 5 of this form or on Scl	hedule I: Yo	our Income.	
2	0a.	Mortgages	s on other property	20a.	\$	0.00
2	0b.	Real estat	e taxes	20b.	\$	0.00
2	0c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
			nce, repair, and upkeep expenses	20d.	· -	0.00
			er's association or condominium dues	20e.	·	0.00
_			ers association of condominant dues		·	
i. C	tne	r: Specify:	-	21.	+\$	0.00
2. <b>C</b>	alcı	ulate vour i	monthly expenses			
		-	through 21.		\$	1,329.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,023.00
					·	
2	∠C. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	1,329.00
3 (	alcı	ulate vour	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	\$	3,403.61
			monthly expenses from line 22c above.	23b.		
2	JU.	Copy your	חוטותווון פגףפווספס ווטווו וווופ 220 מטטעפ.	۷۵۵.	-φ	1,329.00
2	30	Subtract	our monthly avanages from your monthly income			
2	SC.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	2,074.61
		THE TESUIL	is your monuny neumounie.	200.	<u>.</u>	,
4. F	)o v	ou expect :	an increase or decrease in your expenses within the year after y	ou file this	s form?	
			bu expect to finish paying for your car loan within the year or do you expect yo			e or decrease because of a
			terms of your mortgage?	330	, , , , , , , , , , , , , , , , , , , ,	
	N	0.				
			Explain here:			
L	] Ye	es.	LAPIAIII IICIC.			

Fill in this inform	ation to identify your	case:					
Debtor 1	Karen Joy Felts						
	First Name	Middle Name	Last	Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last	Name			
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO				
Simod States Barr	mapley Court for the		<u> </u>				
Case number						☐ Check if this is ar	2
(ii iaiewi)						amended filing	•
						ŭ	
Official Form	106Dec						
<b>Declarati</b>	on About a	n Individual	Debto	or's Schedul	es		12/15
If two married peo	ple are filing together	r, both are equally respor	nsible for su	upplying correct informa	ation.		
						ement, concealing property	
	or property by fraud in U.S.C. §§ 152, 1341, 1		ruptcy case	e can result in fines up to	o \$250,00	00, or imprisonment for up	to 20
years, or both. To	0.5.0. 93 152, 1541, 1	515, and 5571.					
Sign	Below						
Did you pay	or agree to pay some	one who is NOT an attorr	ney to help	you fill out bankruptcy f	orms?		
■ No							
— □ Yes. Na	ame of person			Δ+	tach <i>Ran</i>	kruptcy Petition Preparer's N	otice
						n, and Signature (Official Forr	
Under penalty	y of perjury, I declare	that I have read the sumr	mary and so	chedules filed with this o	declaration	on and	
	true and correct.		•				
X /s/ Kare	n Jov Felts		Х				
Karen J				Signature of Debtor 2			
Signature	of Debtor 1						
Date <b>S</b> e	eptember 13, 2021			Date			
<u></u>	P.C.11801 10, 2021						

Fill	in this inforn	nation to identify you	r case:							
De	btor 1	Karen Joy Felts								
		First Name	Middle Name	Last Name						
	btor 2 buse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF OHIO						
Ca	se number									
1	nown)				_	theck if this is an mended filing				
	ficial Fo									
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19				
info	rmation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you					
		,	arital Status and Where You	Lived Before						
1.	What is you	r current marital statu	ıs?							
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried								
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?								
		_								
	_	<ul> <li>No</li> <li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>								
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territory					
otat	_	55			iso, ronas, rrasimigion and ri	,				
	■ No	ako suro vou fill out Sol	nedule H: Your Codebtors (O	fficial Form 106H)						
		ike sure you iiii out <i>sci</i>	ledule 11. Tour Codebiors (O	modification footij.						
Pa	rt 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No									
		in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$13,518.05	☐ Wages, commissions, bonuses, tips					
			Operating a business		☐ Operating a business					

Official Form 107

Debtor 1 Karen Joy Felts Cas						se number (if known)				
				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
		ndar year: December	31, 2020 )	■ Wages, commissions, bonuses, tips	\$32,763.00	☐ Wages, com bonuses, tips	missions,			
				☐ Operating a business		☐ Operating a	business			
		ndar year be December		■ Wages, commissions, bonuses, tips	\$48,402.00	☐ Wages, com bonuses, tips	missions,			
				Operating a business		☐ Operating a	business			
	and other winnings.  List each	public benef If you are fili	fit payments; ing a joint ca he gross inc	her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	est; dividends; money collector received together, list it to	cted from lawsuits; only once under De	royalties; and ebtor 1.			
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)		
		ndar year be December		Pensions and Annuities	\$5,042.00					
Par	rt 3: Lis	et Cortoin Bo	ymanta Vai	ı Made Before You Filed for Ⅰ	Pankruntov					
Га			•							
6.	Are either No.	Neither De	ebtor 1 nor l	's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	imer debts. Consumer deb	ts are defined in 11	U.S.C. § 101	(8) as "incurred by an		
				ore you filed for bankruptcy, di	d you pay any creditor a tota	al of \$6,825* or mo	e?			
		□ <sub>No.</sub> □ <sub>Yes</sub>	paid that control	each creditor to whom you pai reditor. Do not include paymen payments to an attorney for the	its for domestic support obliquis bankruptcy case.	gations, such as ch	ild support ar	nd alimony. Also, do		
		* Subject	to adjustmer	at on 4/01/22 and every 3 years	s after that for cases filed on	or after the date o	f adjustment.			
	■ Yes			or both have primarily consure you filed for bankruptcy, di		al of \$600 or more?				
		□ No.	Go to line	7.						
		■ Yes	include pay	each creditor to whom you pai yments for domestic support ol r this bankruptcy case.						
	Credito	's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for		
					ļ <i></i>					

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209	3 payments over last 90 days	\$1,269.00	\$14,610.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>		
7.	Within 1 year before you filed for bankruptc <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any ger control, or owner of 20% o	neral partners; partner or more of their voting	rships of which yo securities; and ar	u are a general partner; corporations ny managing agent, including one fo		
	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi  ■ No □ Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a debt that benefited an		
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for this payment		
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures	paid	Still Owe	include creditor's name		
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.  No Yes. Fill in the details.	y, were you a party in ar					
	Case title Case number	Nature of the case	Court or agency		as an insider? are a general partner; corporations managing agent, including one for such as child support and  Reason for this payment count of a debt that benefited an  Reason for this payment Include creditor's name  ive proceeding? ions, support or custody  Status of the case  Pending On appeal Concluded  stayed  Pending On appeal Concluded  Pending On appeal Concluded  Pending On appeal Concluded		
	Wells Fargo Bank Na vs KAREN FELTS 2018CVF011332	CIVIL JUDGMENT	Franklin County Municipal Court 375 South High Street Columbus, OH 43215-4520		☐ Pending ☐ On appeal ☐ Concluded  stayed		
	Hilliard Commons Condominium Association v. Karen Felts, et al. 18CV003771	foreclosure	L JUDGMENT Franklin County Municipal ☐ Pending ☐ On appeal ☐ Concluded ☐ Columbus, OH 43215-4520 ☐ Stayed				
	Jefferson Capital Systems LLC v. Karen Felts 2021 CVF 023067	collection	Franklin County Court 375 South High Columbus, OH	Street	☐ Pending ☐ On appeal ☐ Concluded		
					stayed		

Case number (if known)

Debtor 1 Karen Joy Felts

	Case title Case number	Nature of the case	Court or agency	Status of th	e case
	Mark R. Blackwell v. Karen J. Felts 2008 CVI 016616	collection	Franklin County Municip Court 375 South High Street Columbus, OH 43215-45	☐ On appe	al
10.	Within 1 year before you filed for bankruptor Check all that apply and fill in the details below		erty repossessed, foreclosed,	, garnished, attached	d, seized, or levied?
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happened	I		property
11.	accounts or refuse to make a payment bec.  No Yes. Fill in the details.	ause you owed a debt?			nmounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
	No Yes  List Certain Gifts and Contributions  Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	tcy, did you give any gifts  Describe the gifts	s with a total value of more th	nan \$600 per person Dates you gave the gifts	? Value
14.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift or con		s or contributions with a total	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ı contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptor gambling?  No Yes. Fill in the details.	cy or since you filed for b	ankruptcy, did you lose anytl	hing because of thef	t, fire, other disaster
	how the loss occurred	escribe any insurance co clude the amount that insur surance claims on line 33 c	rance has paid. List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				

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Debtor 1 Karen Joy Felts

Case number (if known)

Debtor 1 Karen Joy Felts Case number (if known)

consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.									
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any proper	nty Date payment or transfer was made	Amount of payment				
	Sheppard Law Offices, Co., LPA 3535 Fishinger Boulevard Suite 190 Hilliard, OH 43026 brandon@sheppardlawoffices.com	Attorney Fees			\$2,500.00				
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No  Yes. Fill in the details.								
	Person Who Was Paid Address	Description and v	alue of any proper	Date payment or transfer was made	Amount of payment				
	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but lnclude both outright transfers and transfers mainclude gifts and transfers that you have already No  Yes. Fill in the details.	usiness or financial affa ide as security (such as t	airs? the granting of a sec						
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		Describe any property or payments received or debraid in exchange	Date transfer was made				
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.								
	Name of trust Description and value of the property transferred Date T made								
Part	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	t Boxes, and Stora	ge Units					
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc	r other financial accou	nts; certificates of	•	•				
	■ No □ Yes. Fill in the details.								
	Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				

Debtor 1 Karen Joy Felts Case number (if known)

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposito	ry for securities,				
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Cial Institution Per, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Do you still have it?  Do you still have it?  Do you still have it?  The details.  Ger, Street, City, State and ZIP Code)  Who else has or had access to it?  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Do you still have it?  Do you still have it?						
22.	Have you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy?	,				
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility	See Fill in the details.  of Financial Institution  See (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  out stored property in a storage unit or place other than your home within 1 year before you filed for bank on the code;  out stored property in a storage unit or place other than your home within 1 year before you filed for bank on the code;  out stored property in a storage unit or place other than your home within 1 year before you filed for bank on the code;  out storage Facility  See (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Out or control any property that someone else owns? Include any property you borrowed from, are sto neone.  Out of the details.  Fill in the details.  Where is the property?  (Number, Street, City, State and ZIP Code)  Where is the property?  (Number, Street, City, State and ZIP Code)  Where is the property?  (Number, Street, City, State and ZIP Code)  Out on the following definitions apply:  **Immental law means any federal, state, or local statute or regulation concerning pollution, contamination, ubstances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, incluions controlling the cleanup of these substances, wastes, or material.  Sans any location, facility, or property as defined under any environmental law, whether you now own, or operate, or utilize it, including disposal sites.  Nous material means anything an environmental law defines as a hazardous waste, hazardous substance, out material means anything an environmental law defines as a hazardous waste, hazardous substance, out material, pollutant, contaminant, or similar term.  Out of the details.  Out of the details.  Governmental unit Address (Number, Street, City, State and ZIP Code)  See Fill in the details		Do you still				
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City,		Do you still have it?  Value  Contamination, releases of hazardous or redium, including statutes or ou now own, operate, or utilize it or used tous substance, toxic substance,  Lolation of an environmental law?  ental law, if you  Date of notice				
Par	t 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP	Describe the property	Value				
Par	t 10: Give Details About Environmental Informa	tion						
or	the purpose of Part 10, the following definitions a	apply:						
	toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub Site means any location, facility, or property as of	r, land, soil, surface water, ground stances, wastes, or material. defined under any environmental la	water, or other medium, including sta	atutes or				
	Hazardous material means anything an environm	nental law defines as a hazardous	waste, hazardous substance, toxic s	ubstance,				
Dan			they ecourred					
·			•	antal law?				
.4.	—	may be hable of potentially hable	under of in violation of an environme	illai law :				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	·						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Do you still have it?  bankruptcy?  Do you still have it?  Value  Value  Value  tion, releases of hazardous or including statutes or  vn, operate, or utilize it or used ance, toxic substance,  an environmental law?  if you  Date of notice				

26.	На	ve you been a party in any judicial or ad	ministrative proceeding under any env	rironmental law? Include settlements and orders.							
		No									
		Yes. Fill in the details.	Court or occupy	Nature of the case	0						
	_	ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of t case	ne						
Pai	t 11	Give Details About Your Business or	Connections to Any Business								
27.	Wi	thin 4 years before you filed for bankrup	otcv. did vou own a business or have ar	ny of the following connections to any business?							
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
		■ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership	pany (==0) or miniou maximy paranoron								
		☐ An officer, director, or managing ex	xecutive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation										
		No. None of the above applies. Go to									
	_	••	II in the details below for each busines	s							
	В	usiness Name	Describe the nature of the business	Employer Identification number							
	A	ddress umber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or IT							
	(.4	uniber, direct, dity, diate and 211 doubt	Name of accountant of bookkeeper	Dates business existed							
	1	den Ray Enterprises LLC 719 Messner Drive illiard, OH 43026	Hauling	EIN: 81-3266189  From-To April 2021 to present							
28.	ins	trin 2 years before you filed for bankrup stitutions, creditors, or other parties.  No  Yes. Fill in the details below.  ame ddress umber, Street, City, State and ZIP Code)	Date Issued	to anyone about your business? Include all financ	ciai						
Pai		Sign Below									
l ha are with	ve r true a k J.S.	ead the answers on this <i>Statement of Fi</i> e and correct. I understand that making a pankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property,	nd I declare under penalty of perjury that the answ or obtaining money or property by fraud in conne 0 years, or both.							
		ren Joy Felts Joy Felts	Signature of Debtor 2								
		ure of Debtor 1	• • • • • • • • • • • • • • • • • • • •								
Dat	e	September 13, 2021	Date								
Did ■ N □ Y	10	attach additional pages to Your Statem	ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?							
Did ■ N		pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	uptcy forms?							
□ Y	'es.	Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declarati	ion, and Signature (Official Form 119).							

Case number (if known)

Debtor 1 Karen Joy Felts

### **LBR Form 2016-1(b)**

### UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Karen Joy Felts		Case No.
		Chapter 13
	Debtor(s)	Judge

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

#### I. **Disclosure**

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that that compensation paid to me within one year before the filing of the perservices rendered or to be rendered on behalf of the debtor(s) in contempla follows:	tition in bankruptcy,	or agreed to be paid to me, for
F	For legal services, I have agreed to accept	\$	4,350.00
	Prior to the filing of this statement I have received		2,500.00
	Balance Due	\$	1,850.00
2.	\$ of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any of associates of my law firm.	other persons unless t	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another p of my law firm. A copy of the agreement, together with a list of the nar attached.	*	

#### II. **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$4,350, for rendering the legal services set forth below. If I seek payment of fees in excess of \$4,350, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
  - Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's a. financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
  - Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, b. applicable court orders, and provisions of his or her chapter 13 plan;
  - Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form c. 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be
  - Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, d.

for

legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in the submission of the annual tax return or the retaining of the tax refund pursuant to the Mandatory Form Chapter 13 Plan, exclusive of any subsequent inquiry, amendment, status report, motion, objection or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Exemption planning; preparation and filing of reaffirmation agreements and applications as needed.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Negotiations with secured creditors to reduce to market value; preparation and filing of motions pursuant to 11

USC 522(f)(2)(A) for avoidance of liens on household goods; representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

Septembe	r 13 2021
OCDICITION	1 13, 2021

Date

/s/ Brandon C. Hendrix

Brandon C. Hendrix

Name

Name
Sheppard Law Offices, Co., LPA
3535 Fishinger Boulevard
Suite 190
Hilliard, OH 43026
614-523-3106

Fax: 614-882-6750

brand on @sheppard law of fices.com

0099111 OH

Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Karen Joy Felts					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the:		Southern District of Ohio				
Case number (if known)						

Check	as directed in lines 17 and 21:
	ording to the calculations required by this ement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	10,		,							
Part	1: Calculate Your Average Monthly Income									
1.	What is your marital and filing status? Check one	only.								
	■ Not married. Fill out Column A, lines 2-11.									
	☐ Married. Fill out both Columns A and B, lines 2-1	1.								
10 th	Il in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the ele 6 months, add the income for all 6 months and divide the transcript of the same rental property, put the income from the	6-mont otal by	th period 6. Fill in	d would be the the	be Ma ult. Do	rch 1 throu not includ	ıgh Auç le any i	gust 31. If the amo	ount of your monthly incomore than once. For examp	e varied during le, if both
							Colui Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	ne, an	d com	missio	ns (b	efore all	\$	933.97	\$	
3.	<b>Alimony and maintenance payments.</b> Do not incluColumn B is filled in.	ide pa	yments	s from a	a spoi	use if	\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Do not include payments from a sp you listed on line 3.	<b>ort.</b> In nold, y	clude r our de	egular ( penden	contri its, pa	ibutions arents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	De	btor 1							
	Gross receipts (before all deductions)	\$		5,292	2.50					
	Ordinary and necessary operating expenses	\$		3,039	9.49					
	Net monthly income from a business, profession, or farm	\$		2,253	3.01	Copy here -> 3	\$	2,253.01	\$	
6.	Net income from rental and other real property	De	btor 1							
	Gross receipts (before all deductions)		·	0.00						
	Ordinary and necessary operating expenses	•	·	0.00						
	Net monthly income from rental or other real propert	y :	\$	0.00	Copy	/ here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor	Karen Joy Felts		Case number	(if known)		
			Column A Debtor 1		Column B Debtor 2 or non-filing spous	se
7. <b>I</b>	Interest, dividends, and royalties		\$	0.00	\$	
8. <b>l</b>	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount received the Social Security Act. Instead, list it here:	was a benefit under				_
	For you \$	0.00				
	For you \$ For your spouse \$	<del></del>				
t r l c	Pension or retirement income. Do not include any amount receipenefit under the Social Security Act. Also, except as stated in the not include any compensation, pension, pay, annuity, or allowance. United States Government in connection with a disability, combated is ability, or death of a member of the uniformed services. If you repay paid under chapter 61 of title 10, then include that pay only to does not exceed the amount of retired pay to which you would other than chapter 61 of the state o	e next sentence, do be paid by the -related injury or received any retired the extent that it herwise be entitled	\$	0.00	\$	_
1 0 0 0 0	Income from all other sources not listed above. Specify the so Do not include any benefits received under the Social Security Actunder the Federal law relating to the national emergency declared under the National Emergencies Act (50 U.S.C. 1601 et seq.) with coronavirus disease 2019 (COVID-19); payments received as a vorime, a crime against humanity, or international or domestic terrocompensation, pension, pay, annuity, or allowance paid by the Ur Government in connection with a disability, combat-related injury death of a member of the uniformed services. If necessary, list other separate page and put the total below.	ct; payments made d by the President in respect to the cictim of a war orism; or nited States or disability, or				
			\$	0.00	\$	
			\$	0.00	\$	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	
	Calculate your total average monthly income. Add lines 2 throweach column. Then add the total for Column A to the total fo	umn B. \$	3,186.98	+ _	= \$	3,186.98  Total average monthly income
	Copy your total average monthly income from line 11 Calculate the marital adjustment. Check one:				\$_	3,186.98
ı	You are not married. Fill in 0 below.					
[	$\square$ You are married and your spouse is filing with you. Fill in 0 b	elow.				
[	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, ti dependents, such as payment of the spouse's tax liability or Below, specify the basis for excluding this income and the ar adjustments on a separate page.	the spouse's suppor	t of someone	other th	an you or your depe	endents.
	If this adjustment does not apply, enter 0 below.					
	une adjourner deed not apply, efficil o below.	\$				
				_		
	Total	Φ.	0.00	) Co	py here=> -	0.00
14.	Your current monthly income. Subtract line 13 from line 12.				\$_	3,186.98
1 <i>E</i>	Calculate your current monthly income for the year. Follow	those store:				
IJ.	15a. Copy line 14 here=>	uncoc otcpo.			\$	3,186.98

Debtor 1	Karen Joy Felts	Case number (if known)			
	Multiply line 15a by 12 (the number of months in a year).	1	X	12	í
15	b. The result is your current monthly income for the year for this pa	rt of the form	\$	38,243.76	

Debte	or 1	Kare	n Joy Felts		Case number (if known)		
16	. Calc	ulate	the median family income that applies to y	ou. Follow these ste	ps:		
	16a.	Fill in	the state in which you live.	ОН			
	16h	Fill in	the number of people in your household.	2			
			the median family income for your state and			\$	67,059.00
	100.	To fir	id a list of applicable median income amounts ctions for this form. This list may also be available.	s, go online using the		Φ_	
17	. How	do th	ne lines compare?				
	17a.		Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	ulation of Your Disp			
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Сор	y you	r total average monthly income from line 1	1		\$	3,186.98
19.	cont	end th	e marital adjustment if it applies. If you are at calculating the commitment period under 1 ncome, copy the amount from line 13.				
			marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
	19b.	Subt	ract line 19a from line 18.			\$	3,186.98
20.	Calc	ulate	your current monthly income for the year.	Follow these steps:			
	20a.	Сору	line 19b			\$_	3,186.98
		Multip	oly by 12 (the number of months in a year).				x 12
	20b.	The r	esult is your current monthly income for the y	ear for this part of the	e form	\$_	38,243.76
	00-	0	the condition for the bound for a condition of	ata a filosocial ald for	as Para 40a	_	67,059.00
	20c.	Сору	the median family income for your state and	size of nousehold fro	m line 16c	<b> </b> \$_	07,039.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwi	se ordered by the co	urt, on the top of page 1 of this form, che	ck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise order	ed by the court, on the top of page 1 of th	is form, c	heck box 4, The
Par	t 4:	Sig	n Below				
	By s	igning	here, under penalty of perjury I declare that t	he information on thi	s statement and in any attachments is tru	e and cor	rect.
)	( /s/	Kare	n Joy Felts				
	Ka	ren J	oy Felts e of Debtor 1				
	·	Sep	otember 13, 2021				
	If we		/ DD / YYYY				
	•		cked 17a, do NOT fill out or file Form 122C-2.		of that form convivour autrent monthly in	come frem	n lino 14 abovo

### **Debtor Income Details:**

Income for the Period 03/01/2021 to 08/31/2021.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Contribution from Daughter

Income by Month:

6 Months Ago:	03/2021	\$700.00
5 Months Ago:	04/2021	\$700.00
4 Months Ago:	05/2021	\$700.00
3 Months Ago:	06/2021	\$700.00
2 Months Ago:	07/2021	\$700.00
Last Month:	08/2021	\$700.00
	Average per month:	\$700.00

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Werner Enterprises

Income by Month:

6 Months Ago:	03/2021	\$1,403.84
5 Months Ago:	04/2021	\$0.00
4 Months Ago:	05/2021	\$0.00
3 Months Ago:	06/2021	\$0.00
2 Months Ago:	07/2021	\$0.00
Last Month:	08/2021	\$0.00
	Average per month:	\$233.97

### Line 5 - Income from operation of a business, profession, or farm

Source of Income: Eden Ray Enterprises LLC

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	03/2021	\$0.00	\$0.00	\$0.00
5 Months Ago:	04/2021	\$6,760.00	\$3,604.27	\$3,155.73
4 Months Ago:	05/2021	\$6,460.00	\$4,296.68	\$2,163.32
3 Months Ago:	06/2021	\$6,605.00	\$2,859.00	\$3,746.00
2 Months Ago:	07/2021	\$2,440.00	\$1,995.00	\$445.00
Last Month:	08/2021	\$9,490.00	\$5,482.00	\$4,008.00
	Average per month:	\$5,292.50	\$3,039.49	
			Average Monthly NET Income:	\$2,253.01

**Current Monthly Income Details for the Debtor** 

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Bradley E. Sherman, Esq. Jefferson Capital Systems LLC PO Box 17210 Golden, CO 80402

Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209

Chase Bank 340 S. Cleveland Avenue, Bldg. 370 Westerville, OH 43081

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Credit Care Collections Attn: Bankruptcy 112 Dowell Ave Bellefontaine, OH 43311

Credit Control Service Po Box 607 Norwood, MA 02062

Dayton VA Medical Center 4100 W. 3rd Street Dayton, OH 45428

Hilliard Commons Condo Assoc. 1667 Bennigan Drive Hilliard, OH 43026

Javitch Block 1100 Superior Ave, 19th Floor Cleveland, OH 44114-2521

Jefferson Capital Systems, LLC Attn: Bankruptcy 16 Mcleland Road Saint Cloud, MN 56303

Kaman & Cusimano 8101 North High Street Suite 370, ATTM Magdalena Myers Columbus, OH 43235

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201 Lendmark Financial Service 1735 North Brown Road Suite 300 Lawenceville, GA 60043

Macys/fdsb Attn: Bankruptcy 7 West Seventh Street Cincinnati, OH 45202

Mark R. Blackwell 704 Cordelia Drive Galloway, OH 43119

Navient Attn: Bankruptcy Po Box 9640 Wiles-Barr, PA 18773

Nelnet Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501

Ohio Department of Taxation PO Box 182402 Columbus, OH 43218-2402

Radius Global Solutions LLC PO Box 390905 Mail Code CSB2 Minneapolis, MN 55439

Robert D. Essex, Esq. 604 East RIch Street, Suite 100 Columbus, OH 43215

Timothy Felts 4580 East Gagarinite Lane San Tan Valley, AZ 85143

Wells Fargo Bank NA 1 Home Campus Mac X2303-01a 3rd Floor Des Moines, IA 50328

Wfhm Attn: Bankruptcy Po Box 10335 Des Moines, IA 50306